

### THE COMMUNITY CARE LICENSING DIVISION'S

# Quarterly Update FALL 2018

### ADULT and SENIOR CARE PROGRAM UPDATE

Mission: To optimize the health and safety of adults and seniors in community care settings.

The Adult and Senior Care Residential Licensing Program licenses Adult Day Programs (ADP), Adult Residential Facilities (ARF), Adult Residential Care Facilities for Persons with Special Healthcare Needs (ARFPSHN), Enhanced Behavioral Supports Homes (EBSH), Community Crisis Homes (CCH), Residential Care Facilities for the Chronically III (RCFCI), Residential Care Facilities for the Elderly (RCFE), and Social Rehabilitation Facilities (SRF) in an effort to ensure that they provide a safe and healthy environment for all persons in care.

# A Note from Pamela Dickfoss, Deputy Director

Welcome to the Community Care Licensing Division (CCLD) Fall Quarterly Update. I want to take this opportunity to recognize the commitment of community care facility licensees who provide quality care for the State's most vulnerable population, the elderly and dependent adults. The comments I've heard during my tenure as Deputy Director is that while the job of a licensee is sometimes demanding and challenging, it is always rewarding.

In 2017, 1,270 adult and senior care facilities ceased operations for a variety of reasons, including change of ownership, retirement, or loss of property. One of the responsibilities of a licensee for any closure is to ensure the smooth transition of the clients/residents to new placements or to the new licensees. It is of utmost importance that clients/residents are not traumatized by the closure or the intent to close.

Residential Care Facilities for the Elderly (RCFE) licensees have an added responsibility to follow licensing requirements, including developing a closure plan, preparing a

relocation evaluation plan for each resident and providing eviction notices to the resident and responsible person 60 days prior to the intended closure date.

It is important to remember that a licensee's statutory and regulatory duty continues until the last client/resident relocates and the license is forfeited to the licensing office or a license is issued to the new owner. Please work closely with your local licensing office during each step of the closure process or if you are contemplating terminating your operations.

For statutory information see:

RCFE Statute: <u>Health and Safety Code Section</u>

<u>1569.682</u>

Community Care Facilities Act: <u>Health and</u>

Safety Code Section 1524.1

Residential Care Facilities for Persons with Chronic Life-Threatening Illness (RCFCI): Health and Safety Code Section 1568.061

For regulatory information see:

Residential Care Facilities for the Chronically III, Title 22 (22CCR); <u>Section 87835</u>; <u>Section 87868.2</u>; <u>Section 87878</u>.

Adult Residential Facilities, Community Crisis Homes, Enhanced Behavioral Supports Homes (also follow General Licensing Requirements), 22CCR; Section 80035; Section 80068.5; Section 80078; Section 85068.5; Section 85078;

Social Rehabilitation Facilities, 22 CCR; Section 81035; Section 81068.5; Section 81078.

Adult Residential Facilities for Persons with Special Health Care Needs, (also follow General Licensing Requirements), 22CCR; Section 80035; Section 80068.5; Section 80078.

Residential Care Facilities for the Elderly, 22 CCR; <u>Section 87468</u>; <u>Section 87224</u>; <u>Section 87507</u>.

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# Be Alert! It is Fire Season

According to the <u>California Drought website</u>, California has been experiencing extreme drought conditions for the past six years. With these bone-dry conditions, wildfires have been raging and affecting regions across the state. There are a number of things you can do to prepare in case a fire threatens your facility:

- Have an evacuation plan. Practice evacuating your facility with your residents. Everyone in the
  facility should be aware of what to do in case there is a need to evacuate. Staff must be well
  equipped and ready to provide whatever assistance is necessary to each individual in care.
  For more information on preparing your facility, go to <a href="Preparing Your Home for Wild Fires">Preparing Your Home for Wild Fires</a>.
- Have your emergency plan in place as to where you would relocate residents if necessary.
   Plan two ways out of your neighborhood in case a fire is threatening one of your evacuation routes.
- Prepare an emergency kit in case of evacuation and keep all important documents, medications, personal identification, and responsible party contact information handy.
- Make sure that fire suppression systems, along with required smoke detectors and carbon monoxide detectors, are in place and working at all times.
- Create a defensible space around your home or facility by clearing away dead branches, wood
  piles and vegetation from your roof, patio furniture and recreation equipment. Keep your rain
  gutters free of debris.
- Monitor the Cal Fire website to be aware of the proximity of fires that may be near you.

Notify your Licensing Program Analyst as soon as possible if you do have to relocate. Have a
current <u>LIC 9020</u> (or <u>LIC 9020A</u> for RCFEs), Register of Facility Clients/Residents, available to
assist in tracking who is in care and where they have been relocated.

Community Care Licensing tracks fires that may pose a danger to our facilities on a seven day a week, 24-hour basis. By notifying us if you have to relocate, we can assist you to ensure that your residents and staff are safe and get the services they need.

### A Mattress Does Not Make A Bed

In a Residential Care Facility for the Elderly (RCFE), when a resident does not provide their own bed, a licensee must provide a bed for the resident or an appropriately sized bed for a married couple as required by the California Code of Regulations (CCR), Title 22, Section 87307, Personal Accommodations and Services. The bed must have good springs, a clean and comfortable mattress, pillow(s), and bedding, CCR, Title 22, Section 87307(a)(3)(A).

If a resident has a risk of falling out of bed that can be verified by the resident's assessments, the Federal Food and Drug Administration (FDA) A Guide to Bed Safety Bed Rails in Hospitals, Nursing Homes and Home Health Care: The Facts, recommends using a bed that can be raised and lowered, but kept in the lowest position, with the wheels locked. The FDA also recommends placing mats alongside the bed, if they do not pose a greater accident risk, to soften any potential fall. As a reminder, if bedrails are used, they may **not** be used to restrict movement, including, but not limited to, preventing a resident from falling out of bed, CCR, Title 22, Section 87608(a)(1). Additionally, these options must never be a substitute for facility personnel being sufficient in numbers, and competent to provide the services necessary to meet a resident's needs at all times as required by CCR, Title 22, Section 87411(a).

When a resident has made a verifiable request, a licensee may permit the resident to have their mattress directly on the floor without a bed frame or to substitute other furniture, such as a recliner the resident considers their "bed" if an exception is requested from, and approved by, the Community Care Licensing Division (CCLD) as specified in CCR, Title 22, <u>Section 87209</u>, Program Flexibility.

# Temporary Manager Candidate List Opportunity

In 2017, CCLD announced the establishment of a Temporary Manager candidate list through PIN 17-09-CCLD. The application form has been updated. If you are interested in becoming a temporary manager candidate, we highly encourage you to apply by completing the LIC 215TM (6/18) Temporary Manager Candidate List Applicant Information form and submitting it to ASCPTemporaryManager@dss.ca.gov or mail to:

> Centralized Applications Bureau ATTN: Temporary Manager 744 P Street, MS 8-3-91 Sacramento, CA 95814



## Nurse Consultant's Corner – Fall Awareness and Prevention

By: Pamela Valencia, RN

Did you know that every 13 seconds an older adult is in an Emergency Room for a fall-related injury? Suffering from a severe fall can cause the resident to suffer bruises, sore muscles, broken bones or worse- death. Fall is the season for "Fall Awareness".

A few changes that may occur as a resident ages:

- Vision and hearing may decline.
- Bones may weaken and muscles generally lose strength and flexibility, resulting in coordination and/or balance problems.
- The increased use of medications may affect balance and coordination.

What else can we do to prevent falls? We can share multiple resources on increasing physical activity, improving balance and share a newer trend of learning how to fall:

- Encouraging and increasing participation in physical activity can go a long way toward fall prevention. Consider activities such as walking, water workouts or tai chi a gentle exercise that involves slow and graceful dance-like movements. Such activities reduce the risk of falls by improving strength, balance, coordination and flexibility.
- A "Matter of Balance" is a structured group intervention that emphasizes practical strategies to reduce fear of falling and increase activity levels. Participants learn to view falls and fear of falling as controllable, set realistic goals to increase activity, change their environment to reduce fall risk factors, and exercise to increase strength and balance. Refer to the "National Council on Aging" in the resources below.
- There is a fall prevention and training program in the Netherlands for participants ranging in age from 65 to 94. The program consists of a clinically designed obstacle course devised to teach the elderly participants how to navigate treacherous ground without having to worry about falling, and how to fall if they did. Refer to the resource below.

As a licensee and provider, you have a number of resources available for you to increase awareness of fall preventive strategies. Please check out this material from the <u>National Council on Aging on</u> "Evidence-Based Fall Prevention Programs".

Please refer to the additional links below.

Resources:

- 1) Fall Prevention Awareness: Mayo Clinic
- 2) Afraid of Falling? For Older Adults, the Dutch Have a Cure
- 3) Video snippets on how to fall
- 4) Centers for Disease Control

### **PAID**

The Wage and Hour Division's (WHD) new nationwide pilot program, the Payroll Audit Independent Determination (PAID) program, facilitates resolution of potential **overtime and minimum wage** violations under the Fair Labor Standards Act (FLSA). The program's primary objectives are to resolve such claims expeditiously and without litigation, to improve employers' compliance with overtime and minimum wage obligations, and to ensure that more employees receive the back wages they are owed—faster.

Under the <u>PAID</u> program, employers are encouraged to conduct audits and, if they discover overtime or minimum wage violations, to self-report those violations. Employers may then work in good faith with WHD to correct their mistakes and to quickly provide 100% of the back wages due to their affected employees.

# Regulation Updates

The Community Care Licensing Division (CCLD) is pleased to announce new regulations, <u>Financial Distress in the Residential Care Facility for the Elderly</u> and <u>Personal Rights and Miscellaneous</u>, which go into effect **October 1, 2018**.

The Financial Distress regulations communicate the RCFE Residents Foreclosure Protection Act of 2011 [Senate Bill (SB) 897, (Chapter 376, Statutes of 2011)], which added Section 1569.686 to the Health and Safety Code (HSC). A licensee is required to report to CCLD, the State Long-Term Care Ombudsman, residents, and their representatives in writing within two business days of experiencing any of the following financial distress events:

- Notice of default or other indication of property foreclosure
- Unlawful detainer
- Filing of bankruptcy
- Notice of intent to terminate utilities

A licensee is also required to report these events to potential residents and their representatives **in writing before an admission agreement is signed**. If a licensee fails to report any of these events as required, they may be subject to a civil penalty issued by CCLD.

The Personal Rights and Miscellaneous regulations incorporate the RCFE Resident's Bill of Rights, and the Lesbian, Gay, Bisexual, and Transgender Long-Term Care Facility Residents' Bill of Rights [Assembly Bill (AB) 2171 (Chapter 702, Statutes of 2014, Health and Safety Code Section 1569.261, et seq., and SB 219 (Chapter 483, Statutes of 2017, Health and Safety Code Section 1439.50, et seq. A licensee is required to do all of the following concerning resident personal rights:

- Post personal rights, nondiscrimination notice, and complaint reporting information in English and in any other language in which at least 5% of the residents can only read that other language.
- Advise residents and their representatives, and give them a copy, of personal rights and nondiscrimination notice. Licensees are also required to have residents and their representatives sign the copy, and the signed copy must be included in the resident's record.

- Observe the personal rights of residents in all facilities and/or additional personal rights of residents in privately operated facilities, as applicable to whether a facility is privately or publicly operated.
- Maintain records for residents that include preferred name, gender identity, and preferred pronoun as indicated by the resident.

Other miscellaneous regulation updates require licensees to observe a change in terminology from "dermal ulcer" and "pressure sore" to "pressure injury" and notify residents or their representatives, and the licensing agency at least thirty (30) days prior to a transfer of license.

CCL is updating courtesy forms provided by the Department related to personal rights. In the interim, licensees are still expected to provide a copy of the applicable personal rights to a resident and the resident's representative when the admission agreement is signed and prominently post applicable personal rights and complaint information in areas accessible to residents, representatives, and the public. The personal rights provided to residents and posted in the facility must be those reflected by the regulations, which become effective October 1, 2018.

## New Inspection Process Project Updates

CCLD launched the three-month Senior Care Inspection Tool Pilot on July 1, 2018 to field test new comprehensive and specialty tools along with Field Automation System features designed to streamline inspection procedures. More information regarding the pilot can be found on the <a href="Inspection Process Project website">Inspection Process Project website</a>.

As of September 21, 2018, CCLD has conducted 117 inspections using the new inspection tools and procedures. When compared to the past two prior Annual/Random/Required Three-Year inspections, the preliminary results of the pilot indicate that the:

- average duration for inspections was approximately twice as long
- average total number of citations issued were similar to that of previous inspections
- number of advisory notes, that are considered as technical assistance (TA) or technical violations (TV), increased.

Once the pilot concludes, CCLD will release a final report of the pilot findings. Thank you to the pilot participants and many internal and external stakeholders who have and continue to provide comments and feedback.

# Management Information

**Monica Filice** was promoted to Bureau Chief – Centralized Complaint Information Bureau, effective 7/1/18.

Andy Xiong was promoted to LPM I, Fresno Adult and Senior Care Regional Office, effective 8/1/18.



Are you interested in becoming part of the Community Care Licensing team?

Please apply at: CalCareers

• Information on how to apply for a State job can be found at the <a href="Cal Careers Website">Cal Careers Website</a>.

Links to Adult and Senior Care Program Office Websites:

Adult Care
Senior Care
Central Applications Bureau

Remember to check for new PINS

IMPORTANT PHONE NUMBERS		
Centralized Complaint Information Bureau (CCIB)	1-844-538-8766	
Administrator Certification	916-653-9300	
Caregiver Background Check Bureau (CBCB)	1-888-422-5669	
Long Term Care Ombudsman	1-800-231-4024	
CCLD Public Inquiry and Response	916-651-8848	
Technical Support Program	916-654-1541	
Centralized Applications Bureau	916-657-2600	

**Program Administrator-** Ley Arquisola, RN, MSN **Assistant Program Administrators**:

Evelyn Schaeffer- Northern CA, Claire Matsushita- Central CA, Kimberly Lyon- Southern CA